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CONFIRMATION NO. 9597

<b>SERIAL NUMBER</b> 10/698,496	<b>FILING OR 371(c) DATE</b> 10/31/2003 <b>RULE</b>	<b>CLASS</b> 606	<b>GROUP ART UNIT</b> 3731	<b>ATTORNEY DOCKET NO.</b> 19799-206	
<b>APPLICANTS</b> Steven L. Jacques, Westford, MA;  <b>** CONTINUING DATA *****</b> This appln claims benefit of 60/423,311 11/01/2002 <i>TW 7/17/06</i> <b>** FOREIGN APPLICATIONS *****</b>  <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 02/03/2004					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>Wanguyen</i> Examiner's Signature <i>W</i> Initials		<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 25	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> 21890					
<b>TITLE</b> Low profile short tapered tip catheter					
<b>FILING FEE RECEIVED</b> 990	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		